BEST AVAILABLE COPY.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I

Application or Docket Number

101047446

			(Column 1)		(Column 2)			TYPE		OR	OR SMALL ENTITY	
TOTAL CLAIMS			6/				[RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			() minus 20=		*	3 41		X\$ 9=	369	OR	X\$18=	
IND	EPENDENT CL	AIMS	+ minus 3 =		*	4	ſ	X42=	169	OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				Ī	+140=	<u> </u>	OR	+280=	
* If	the difference	olumn 2	L	TOTAL	807	OR	TOTAL					
CLAIMS AS AMENDED - PART II									Ţ Ţ		OTHER	THAN
(Column 1)			(Columr			(Column 3)	_	SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	i	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	OL AIRA	=	ı	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
							-	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colum		(Column 3)		_				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	CL AIM	-		X42=		OR	X84=	
	TINOTTTIESE	NIATION OF IM	JETH CE DEI	LINDLINI	OLANI	.·		+140=		OR	+280=	
			_ A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE					
		(Column 1)		(Colun		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N Q	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
AME.	Independent	*	Minus	***		=	╽┟	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		╵├	+140=			1280-	
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280= TOTAL	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er fou	nd in the app	propriate bo	x in co	lumn 1.	